Semi-Annual Statement of No Activity  For use by recipient committees that have not received any contributions and have not made during the six-month period covered by a semi-annual statement. Candidate controlled on elective office may not use this form.			Type or print in ink		STATEMENT OF NO ACT	IVITY			
				Date Stamp ひとしいと	CALIFORNIA 42	7			
			de any expenditures CITY (CC)		For Official Use Only	For Official Use Only			
See the Information Manual on Ca information required to be provide		sions of the Political Reform Act for formation Practices Act of 1977.		· <del>-</del> · · · · · <del>·</del>					
1. Committee Informati	on	I.D. NUMBER 1292313	Treasurer(s)		THE THE STATE OF T	Sampa-appropriated			
COMMITTEE NAME			NAME OF TREASURER						
Friends of Goleta			Catherine E. Bednar						
			MAILING ADDRESS						
			5701 Gato Avenue						
STREET ADDRESS (NO P.O. BOX)			CITY	STATE	ZIP CODE AREA CODE/PHO	ONE			
5701 Gato Avenue			Goleta	CA	93117 (805) 964-556	62			
CITY	STATE ZIP CC	DE AREA CODE/PHONE	NAME OF ASSISTANT TREASU	RER, IF ANY					
Goleta	CA 9311	7 (805) 964-5562							
MAILING ADDRESS (IF DIFFERENT	) NO. AND STREET		MAILING ADDRESS	.,					
CITY	STATE ZIP CC	DE AREA CODE/PHONE	CITY	STATE	ZIP CODE AREA CODE/PHO	ONE			
OPTIONAL: FAX/E-MAIL ADDRESS	3		OPTIONAL: FAX/E-MAIL ADDR	ESS					
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No contributions have bee	n received and no exp	enditures have been made du	ring the period covering the da	ates below:					
Check one of the followi	ng boxes and compl	ete the year. 🗵 January	1, through June 30, 20	☐ July 1,	through December 31, 20				
3. Verification		nissa kannonis kannon mahatakan mahatan epinote yang oloh kannonis kannonis mahatan kannonis kannonis kannonis	in talah talah di kada da dari kembandak dalah dalah dalah dari kecil menjadi menjali di menjali di menjali di	a formalisen som eg teste som given den met men over terresen om essesse fre					
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Executed on	30, 2012 DATE		By Catherine SIGNATUR	J. C. Bed E OF TREASURER/ASSISTA	natu				
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FPPC Form 425 (Jan/01) FPPC Toll-Free Helpline: 866/ASK-FPPC 866/275-3772

Semi-Annual Staten	nent of No Activit	M	Type or print in ink	Date Stamp	17779 SARDISHBIR	TEMENT OF NO ACTIVITY		
For use by recipient committe during the six-month period co an elective office may not u	overed by a semi-annual s	any contributions and have no tatement. Candidate control	t made any expenditures CTY ¢LER led committees formed for			FORM 4240		
		isions of the Political Reform Ac nformation Practices Act of 197						
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COMMITTEE NAME			NAME OF TREASURER	NAME OF TREASURER				
Friends of Goleta			Catherine E. Bednar	Catherine E. Bednar				
		MAILING ADDRESS	MAILING ADDRESS					
		5701 Gato Avenue	5701 Gato Avenue					
STREET ADDRESS (NO P.O. BO	X)		CITY	STATE	ZIP CODE	AREA CODE/PHONE		
5701 Gato Avenue			Goleta	CA	93117	(805) 964-5562		
CITY	STATE ZIP C		NAME OF ASSISTANT TREASURER	, IF ANY				
Goleta	CA 931	17 (805) 964-5562						
MAILING ADDRESS (IF DIFFERE	ENT) NO. AND STREET		MAILING ADDRESS			1847-448 das Parinti Parinti Parinti Ingel Parinti 2011 2011 2011 2011 2011 2011 2011 201		
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Executed on	DATE		SIGNATURE OF	TREASURER/ASSISTAL	NT TREASURER	ng and a large of the part of the first and a second of the second of th		

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